

PLEASE TYPE INFORMATION

FORM **BC-1868(EF)**
(8-13-2002)U.S. DEPARTMENT OF COMMERCE
ECONOMICS AND STATISTICS ADMINISTRATION
U.S. CENSUS BUREAU**REQUEST FOR OFFICIAL CERTIFICATION****Section I – CONTACT INFORMATION – (Complete items 1–5)**

1. Today's date		2. Date needed	
3. Contact			
a. Name		b. Company	
c. Address 1			
d. Address 2			
e. City		f. State	g. ZIP Code
h. Telephone number		i. Fax number	
j. E-mail address			

4. Detailed explanation of your certification request (*List exact tables or furnish examples, etc., if possible*):*If more space is needed, use a blank page to continue and be sure to put your name at the top.***5.** Where to send this request (*If you have any questions, please phone **301-763-INFO (4636)***).E-mail to: **MSO.Certify@census.gov**
(Attach form)Fax to: **Customer Services Center/MSO**
301-457-4714**Section II – FOR INTERNAL USE ONLY – Do NOT write below this line**

Line 1	Tracking number		Date received	
Line 2	Division assigned	Name	Telephone number	Date sent to division
Line 3	Code	Comments	Price \$	
Line 4	Customer approval	<input type="checkbox"/> Yes <input type="checkbox"/> No	Date customer returned approval	
Line 5	Date order entered		Order number	
Line 6	DIV to CQAS date			
Line 7	CQAS to MSO date		CQAS tracking code	
Line 8	Date product sent to customer		FedEx tracking code	